



Receipt

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Group Art Unit: 3644

Examiner: To Be Assigned

In re PATENT APPLICATION of

Applicant(s) : Zhen-Man LIN

Appln. No. : 10/029,951

Filed : December 31, 2001

For : THE NEWEST DEVICE FOR
PRECAUTION SKYJACKING AND
SYSTEM

Atty. Dkt. : GIA 117

CFR # 3
E Burns
03/15/02

REQUEST
FOR CORRECTED
FILING RECEIPT

March 5, 2002

Attention: Office of Initial Patent Examination
Commissioner for Patents
Washington, D.C. 20231

RECEIVED

MAR 14 2002

GROUP 3600

Sir:

Submitted herewith is a copy of the original Filing Receipt for the above-referenced application. Upon review, it has been determined there are errors in the filing receipt indicated as follows:

INCORRECT

CORRECT

In the Name of the Applicant:

Lin Zhen-Man

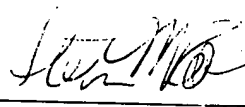
Lin, Zhen-Man
or Zhen-Man LIN

A highlighted marked-up copy of the Filing Receipt is attached. It is respectfully requested that a corrected Filing Receipt be forwarded to our attention.

Respectfully submitted,

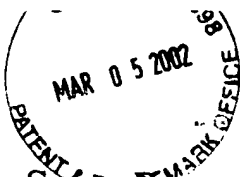
March 5, 2002

Date


Steven M. Rabin (Reg. No. 29,102)
RABIN & BERDO, P.C.
(Customer No. 23995)
Telephone: (202) 659-1915
Telefax: (202) 659-1898

SMR:QZ:tz

FEE ENCLOSED: \$
Please charge any further
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No. 18-0002



UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO.	DRAWINGS	TOT CLAIMS	IND CLAIMS
10/029,951	12/31/2001	3644	370	GIA 117	4	9	1

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CONFIRMATION NO. 5248

FILING RECEIPT



OC000000007496024

BY:.....

RABIN & BERDO, P.C.
Suite 500
1101 14th Street N.W.
Washington, DC 20005

Date Mailed: 02/19/2002

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Lin, Zhen-Man, Kowloon, HONG KONG;

Domestic Priority data as claimed by applicant

Foreign Applications

CHINA 01255903.2 02/25/2001

If Required, Foreign Filing License Granted 02/14/2002

Projected Publication Date: 08/29/2002

Non-Publication Request: No

Early Publication Request: No

** SMALL ENTITY **

Title

Device for precaution skyjacking and system

Preliminary Class

244

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Bib Data Sheet

CONFIRMATION

SERIAL NUMBER 10/029,951	FILING DATE 12/31/2001 RULE	CLASS 244	GROUP ART UNIT 3644	ATTORNEY DOCKET NUMBER GIA 117
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APPLICANTS

Zhen-Man Lin, Kowloon, HONG KONG;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

CHINA 01255903.2 02/25/2001

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
** 02/14/2002

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY HONG KONG	SHEETS DRAWING 4	TOTAL CLAIMS 9	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>				

ADDRESS

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TITLE

Device for precaution skyjacking and system

FILING FEE RECEIVED 370	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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